

# BALLOT DESIGNATION WORKSHEET

RECEIVED

This worksheet is intended to assist in the prompt evaluation of requested ballot designations.

2014 FEB 28 PM 1:06

Name of Candidate: MILTON HERRING

Candidate for the Office of: TORRANCE CITY COUNCIL  
(Including district or division number, if applicable)

CITY OF TORRANCE  
CITY CLERK'S OFFICE

Home Address: 22710 CYPRESS ST.  
(Number and street address)  
TORRANCE, CA 90501  
(City, State and Zip Code)

Daytime Telephone Number: 310 701-4316  
(area code)

Evening Telephone Number: 310-891-1525  
(area code)

Fax Telephone Number: 888-732-4377  
(area code)

E-mail: herringmit@gmail.com

Business Address: \_\_\_\_\_  
(Number and street address)  
\_\_\_\_\_  
(City, State and Zip Code)

Name of Attorney or Other Person Authorized to Act in  
Your Behalf: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(If different from above)  
\_\_\_\_\_  
(City, State and Zip Code)

His/Her Fax Number: \_\_\_\_\_  
(area code)

Telephone Number: \_\_\_\_\_  
(area code)

E-mail Address: \_\_\_\_\_

PROPOSED BALLOT DESIGNATION: Retired Military Officer

(Note: Designation must be your principal profession, vocation or occupation and may be no more than three words;  
however, you may use the full title of the elective office you currently hold.)

(optional)

If above not accepted, 1<sup>st</sup> alternative: NONE  
2<sup>nd</sup> alternative: \_\_\_\_\_

Describe what you do and why you believe you are entitled to use the requested ballot designation. If using the title of an elective office,  
you may submit a copy of your certificate of election or appointment.

The term "incumbent" must be used as a noun. It shall not be used in conjunction with any other words, including any accompanying  
adjectives or modifiers, and must stand alone.

Your Job Title: CHAPLAIN (LTC) USAR

Contact Person(s) Who Can Verify this Information:

Dates You Held the Position: Dec. 1985 - Aug. 2009

Name(s): William Brunold

Name of Your Employer or Business: U.S. ARMY

Telephone Number(s): 818 620-8008  
(area code)

To the best of my knowledge and belief, the above-requested ballot designation(s) represent my true principal profession(s), vocation(s)  
and/or occupation(s) which I am entitled to use as my ballot designations pursuant to §13107 and 13107.5 of the Elections Code.

Signed and dated this 28 day of Feb, in TORRANCE, CA  
(location)

Signature

You may attach whatever supporting documentation or exhibits you wish that you believe support your proposed ballot designation.  
These documents will not be returned to you, so do not submit original versions.